## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

894.930US]

| CLAIMS AS FILED - PART<br>(Column 1)  |  |   |                  |                       | (Column 2)                   |                  |        | SMALL ENTITY TYPE   |                        |         | OTHER THAN OR SMALL ENTITY |                        |  |
|---|--|---|------------------|-----------------------|------------------------------|------------------|--------|---------------------|------------------------|---------|----------------------------|------------------------|--|
| TOTAL CLAIMS  |  |   | マフ               |                       |                              |                  | ſ      | RATE                | FEE                    |         | RATE                       | FEE                    |  |
| FOR   |  |   | NUMBER FILED     |                       | NUMBER EXTRA                 |                  |        | BASIC FEE           | 375.00                 | OR      | BASIC FEE                  | 750.00                 |  |
| TOTAL CHARGEABLE CLAIMS   |  |   | 37 minus 20=     |                       | • 17                         |                  |        | X\$ 9=              |                        | OR      | X\$18=                     | 306                    |  |
| INDEPENDENT CLAIMS  |  |   | 8 minus 3 =      |                       | 5                            |                  |        | X42=                |                        | OR      | X84=                       | 42D                    |  |
| MU  | LTIPLE DEPEN                                   | DENT CLAIM PI                             | RESENT           |                       |                              |                  |        | +140=               |                        | OR      | +280=                      |                        |  |
| * If  | the difference                                 | in column 1 is                            | less than ze     | ro, enter             | "0" in c                     | olumn 2          |        | TOTAL               |                        | OR      | TOTAL                      | 1476                   |  |
| /   |  | LAIMS AS A                                | MENDED - PART II |                       |                              |                  |        |                     |                        |         | OTHER THAN SMALL ENTITY    |                        |  |
| 2/  | 8104   | (Column 1)                                |                  | (Colur                |                              | (Column 3)       | 1 ,    | SMALL E             |                        | OR      | SMALL                      |                        |  |
| AMENDMENT A   |  | REMAINING<br>AFTER<br>AMENDMENT           |                  | NUM<br>PREVIO<br>PAID | BER<br>OUSLY                 | PRESENT<br>EXTRA |        | RATE                | ADDI-<br>TIONAL<br>FEE |         | RATE                       | ADDI-<br>TIONAL<br>FEE |  |
|   | Total  | .37                                       | Minus            | ** (                  | 37                           | =                |        | X\$ 9=              |                        | OR      | X\$18=                     |                        |  |
|   | Independent                                    | * 8<br>NTATION OF MI                      | Minus            | *** C                 | S CLAIM                      | = /              |        | X42=                |                        | OR      | X84=                       |                        |  |
|   | FIRST PRESE                                    | NIATION OF MI                             | JETIPLE DEF      | CINDEIN               | CLANV                        | <u> </u>         | '      | +140=               |                        | OR      | +280=                      |                        |  |
|   |  |   |                  |                       |                              |                  |        | TOTAL<br>ADDIT. FEE |                        | OR      | TOTAL<br>ADDIT. FEE        |                        |  |
|   |  |   |                  |                       |                              |                  |        |                     |                        |         |                            |                        |  |
| AMENDMENT B   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                  | PREVI                 | BER                          | PRESENT<br>EXTRA |        | RATE                | ADDI-<br>TIONAL<br>FEE |         | RATE                       | ADDI-<br>TIONAL<br>FEE |  |
|   | Total  | *   | Minus            | **                    |                              | =                |        | X\$ 9=              |                        | OR      | X\$18=                     |                        |  |
|   | Independent                                    | *   | Minus            | ***                   |                              | -                | ▋┃     | X42=                |                        | OR      | X84=                       |                        |  |
| Ľ   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                  |                       |                              |                  | ▎└     | +140=               |                        | OR      | +280=                      |                        |  |
|   |  |   |                  |                       |                              |                  |        | TOTAL<br>ADDIT, FEE |                        | OR      | TOTAL<br>ADDIT. FEE        |                        |  |
| (Column 1) (Column 2) (Column 3)  |  |   |                  |                       |                              |                  |        |                     |                        |         |                            |                        |  |
| AMENDMENT C   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                  | NUM<br>PREVI          | HEST<br>IBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA |        | RATE                | ADDI-<br>TIONAL<br>FEE |         | RATE                       | ADDI-<br>TIONAL<br>FEE |  |
|   | Total  |   | Minus            | ##                    |                              | =                | ] [    | X\$ 9=              |                        | OR      | X\$18=                     |                        |  |
|   | Independent                                    | •   | Minus            | ***                   |                              | =                | 1 [    | X42=                | ·                      | OR      | X84=                       |                        |  |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                  |                       |                              |                  |        |                     |                        |         | 000                        |                        |  |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |  |   |                  |                       |                              |                  |        | +140=<br>TOTAL      |                        | OR      | +280=                      |                        |  |
| **  | If the "Highest Nu                             | mber Previously P                         | aid For IN THI   | S SPACE               | is less tha                  | ın 20, enter "20 | )." ,  | ADDIT. FEE          |                        | OR      | TOTAL<br>ADDIT. FEE        |                        |  |
|   |  | nber Previously Pa                        |                  |                       |                              |                  | er fou | ınd in the apı      | propriate bo           | k in co | lumn 1.                    |                        |  |